



COMMONWEALTH of VIRGINIA

Department of Health

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To: Virginia EMS Agencies
Regional EMS Councils
Operational Medical Directors

From: Michael D. Berg
Manager, Regulation and Compliance

Subject: Provision of Patient Care Documentation - Update

The *Virginia Emergency Medical Services Regulations* 12 VAC 5-31-1140 B. Provision of patient care documentation, states:

“B. The signature of the medical practioner who assumes responsibility for the patient shall be included on the prehospital patient care report for an incident when a medication is administered, or self-administration is assisted (excluding oxygen), or an invasive procedure is performed. The medical practioner signature shall document that the physician has been notified of the medication administered and procedures performed by the EMS personnel. EMS personnel shall not infer that the medical practioner’s signature denotes approval, authorization or verification of compliance with protocol, standing orders or medical control orders.”

The purpose of this memorandum is to update the EMS system in a change in the language for the *Code of Virginia* which further defines “medical practioner”. During the 2005 session of the General Assembly, §54.1-3408 Professional use by practioners states in part:

- A. A practitioner of medicine, osteopathy, podiatry, dentistry, or veterinary medicine or a licensed nurse practitioner pursuant to § [54.1-2957.01](#), a licensed physician assistant pursuant to § [54.1-2952.1](#), or a TPA-certified optometrist pursuant to Article 5 (§ [54.1-3222](#) et seq.) of Chapter 32 of this title shall only

prescribe, dispense, or administer controlled substances in good faith for medicinal or therapeutic purposes within the course of his professional practice.

- B. The prescribing practitioner's order may be on a written prescription or pursuant to an oral prescription as authorized by this chapter. The prescriber may administer drugs and devices, or he may cause them to be administered by a nurse, physician assistant or intern under his direction and supervision, or he may prescribe and cause drugs and devices to be administered to patients in state-owned or state-operated hospitals or facilities licensed as hospitals by the Board of Health or psychiatric hospitals licensed by the State Mental Health, Mental Retardation and Substance Abuse Services Board by other persons who have been trained properly to administer drugs and who administer drugs only under the control and supervision of the prescriber or a pharmacist or a prescriber may cause drugs and devices to be administered to patients by emergency medical services personnel who have been certified and authorized to administer such drugs and devices pursuant to Board of Health regulations governing emergency medical services and who are acting within the scope of such certification. A prescriber may authorize a licensed respiratory care practitioner as defined in [§ 54.1-2954](#) to administer by inhalation controlled substances used in inhalation or respiratory therapy.*

The interpretation now allows for Nurse Practitioners and Physician Assistants to sign the prehospital patient care report as defined in 12 VAC 5-31-1140. This was verified during a meeting with the Virginia Board of Pharmacy sub-group with their policy analyst. This change does not alter the *Virginia Board of Pharmacy Regulations* 18 VAC 110-20-500 Licensed emergency medical service program (January 11, 2006).

Please share this information with your fellow providers, EMS agencies and facilities. Should there be additional questions regarding this notification, please do not hesitate to call upon this Office.